



NEVADA FINANCIAL DISCLOSURE STATEMENT (FI.S)

Please read the instruction before completing. Attach additional sheets if necessary. JAN 15 2010

COMMISSION ON ETHICS

PERSONAL INFORMATION: NAME: William A. Kohbarger			LENGTH OF RESIDENCE IN NIEVADA: 9.4 yrs.						
ADDRESS: 941 W. Florida Street									
CITY, STATE, ZIP: Pahrump, NV 89048		LENGTH OF RESIDENCE IN DUTRICT WHERE REGISTERED TO VOTE: 1.1 yrs.							
TELEPHONE: 775-209-5848			E-MAIL: bkohbarger@pal\rumpnv.org						
ECTION A (Public Office): List all public offices for which this nd check each box accordingly i.e. annual, candidate or appo	financial (intment fil	disclo ing. N	sure stater IRS 281A.	nent is require 620.1(g).	ed				
	Elected, appointed or appointed to elected	(E, A, AE)	Annual Compensation	Date elected or appointed	ANNUAL NRS 281A.660.1 & 281A.610.1	CANDIDATE NRS 281A.610.1(a).	APPOINTMENT NRS 201A,600.1		
Title of Public Office and Name of Government	0				Check the	ooxes belo			
Town Manager, Town of Pahrump	A	\$ 105	,000,	Jun 30, 2008	1				
		3							
PROTION D. (On the second of the second pourse of vour inc	come (in a	\$ dditio	n to any sc	aurce listed i t	Section A), or that	t of		
any member of your household who is 18 years of age or olde	er, NRS28	s dditio 1A.62	n to any sc 0.1(b).	ource listed i 1		H Self I Check the boxes	ousehol Vember oppropriet		
SECTION B (Sources of Income): List each source of your income in member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age or older any member of your household who is 18 years of age of your household who is 18 years of y	er, NRS28	\$ dditio	n to any so 0.1(b).	ource listed i t		H Self I	ousehol Vember oppropriet		
any member of your household who is 18 years of age or olde	er, NRS28	\$ dditio	n to any so 0.1(b).	ource listed i 1		H Self I Check the boxes	ouseho Vember		
any member of your household who is 18 years of age or olde	np lar use of	all rea	u.1(b).	ther than pers	sonal resid	Self I Check the boxes	ouseho Membel approprie below		
Town of Pahrur SECTION C (Real Property): List specific location and particular which you or a member of your household has a legal or benefice; and (3) located in this state or an adjacent state. NRS 2 Specific Location	np lar use of	all rea	u.1(b).	ther than pers	sonal resid	Self I Check the boxes	ousehol Member eppropriet helow		
Town of Pahrur SECTION C (Real Property): List specific location and particular which you or a member of your household has a legal or benefice; and (3) located in this state or an adjacent state. NRS 2 Specific Location	np lar use of	all rea	u.1(b).	ther than pers	sonal resid	Self I Check the boxes	ousehol Member eppropriet below		

Name of Public Officer: William A. Ko	ohbarger			
SECTION D (Creditors): List each creditor to debt secured by mortgage or deed of trust or retained by seller. NRS 281A.620.1(d).	o whom you or a member of your household owes \$5,0() on your personal residence; and (2) debt on a motor veh) or more le for p	ersonal u Self	ise Household Member
				e appropriate exes
	N/A		1	
		-		
	•			
value of \$200 from a donor during the prece you within the third degree of consanguinity anniversary, holiday or other ceremonial oc- administrative, or political action]. NRS 281/		rson wh /, weddi	o is relating, gislative,	ed to
Gift None	<u>Donor</u>	\$	Value of	GIII
Notice				
		\$		
		\$		
		\$		
including a proprietorship, partnership, firm, you or a member of your household is invol	susiness entity (i.e., organization or enterprise operated for business, trust joint venture, syndicate, corporation or a seved as a trustee, beneficiary of a trust, director, officer, comess of stock or security representing 1% or more of the top S 281A.620.1(f).	sociatio vner in v	n) with v whole or	rhich in part,
,				Household
			Self	Member
				e appropriate oxes
	None			
			- 	
THE INFORMATION I HAVE PROVIDED HE	EREIN IS ACCURATE AND COMPLETE.			<u> </u>
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_{Date:} Jan 15, 2010	Signature: Willows Forkingu			· · · · · · · · ·
	Print Name: William A. Kohbarger			
WHERE TO FILE;				
APPOINTED PUBLIC OFFICERS SUBMIT TO:	ELECTED PUBLIC OFFICERS OR CANDIDATES SUBMIT TO:	;		
Nevada Commission on Ethics	Nevada Secretary of State, Elections Division			
3476 Executive Pointe Way, Suite 10 Carson City, Nevada 89706 775,687,5469 • 775,687,1279 fax	101 North Carson Street, Suite 3 Carson City, Nevada 89701 775.684.5705 • 775.684.5718 fax			

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